

Substitute for form 1449/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

| | |
|----------------------|-------------------|
| Application Number | 10/589,226 |
| Filing Date | December 20, 2006 |
| First Named Inventor | David Knaack |
| Art Unit | 1615 |
| Examiner Name | Unknown |

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|-------|---|----|---|------------------------|-------------|
| Sheet | 1 | of | 1 | Attorney Docket Number | 189704/US/2 |
|-------|---|----|---|------------------------|-------------|

U.S. PUBLISHED DOCUMENTS

| *Examiner Initials | Cite No. | DOCUMENT NUMBER Number - Kind Code (if known) | Publication Date MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
|-----------------------|-------------|--|--------------------------------|--|---|
| /C.A./ | | US- 2003/0049326 A1 | 03-13-2003 | Marcel E. Nimni | |
| /C.A./ | | US- 2003/0135214 A1 | 07-17-2003 | Joseph F. Fetto et al. | |
| /C.A./ | | US- 2003/0147860 A1 | 08-07-2003 | J. Alexander Marchosky | |
| | | | | | |

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|-----------------------|-------------|--|--------------------------------|--|---|
| /C.A./ | | US- 6,468,543 B1 | 10-22-2002 | Gilbertson et al. | |
| | | US- | | | |

FOREIGN PATENT DOCUMENTS

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|----------------------|-------------|-------------------------|----------------------------------|-----------------------------------|--|--|--------------------------|--------------------------|
| | | Country Code: | Number - Kind Code (if known) | | | | YES | NO |
| /C.A./ | | WO | 03/030956 A2 | 04-17-2003 | Osteotech, Inc. | | <input type="checkbox"/> | <input type="checkbox"/> |
| /C.A./ | | WO | 01/00792 A1 | 01-04-2001 | Alexander Marchosky | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
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|-----------------------|-------------|--|--------------------------|--------------------------|
| | | Copy of Australian Written Opinion (6pgs) | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> |

EXAMINER SIGNATURE /Carlos Azpuru/

DATE CONSIDERED 07/13/2011

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.



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Art Unit 1615

Examiner Name Unknown

Sheet 1 of 1

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|-----------------------|-------------|--|--------------------------|--------------------------|
| | | | YES | NO |
| | | Copy of Australian Written Opinion (6pgs) | <input type="checkbox"/> | <input type="checkbox"/> |

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